Case 14-45392 Doc 1 Filed 07/07/14 Entered 07/07/14 16:50:53 Main Document

	<u> </u>		United Eas		Banki istrict o						Voluntary	Petition
Name of De Nichols,	*		er Last, First,	Middle):			Name	of Joint De	ebtor (Spouse) (Last, First	t, Middle):	
(include mar	All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Shemika Jackson						used by the J maiden, and		in the last 8 years			
Last four dig (if more than one	, state all)	Sec. or Indi	vidual-Taxpa	yer I.D. (ITIN)/Com	plete EIN	Last 1	our digits o	f Soc. Sec. or	· Individual-	Taxpayer I.D. (ITIN) No)./Complete EIN
Street Addre 8616 Mo Saint Lo	ss of Debto ra Lane	r (No. and	Street, City, a	and State)	_	ZIP Co		Address of	Joint Debtor	(No. and St	reet, City, and State):	ZIP Code
County of Re	esidence or	of the Princ	cipal Place o	f Business		63147	Coun	ty of Reside	ence or of the	Principal Pl	ace of Business:	
Saint Lo			1					•		•		
Mailing Add	ress of Deb	otor (if diffe	rent from str	eet addres	s):		Maili	ng Address	of Joint Debt	or (if differe	ent from street address):	
					Г	ZIP Co	de					ZIP Code
Location of I (if different f	Principal As from street	ssets of Bus address abo	siness Debtor ove):									
- T		Debtor	1)			of Busine	ess		-	-	ptcy Code Under Whiciled (Check one box)	:h
Individua See Exhibit □ Corporati □ Partnersh	al (includes it D on page ion (include iip debtor is not	Joint Debto 2 of this form es LLC and	ors) n. LLP)	Sing in 1 Rail Stoo	Ith Care Bugle Asset Re 1 U.S.C. § road kbroker nmodity Broring Bank	siness eal Estate 101 (51B)		☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	☐ C of ☐ C of	hapter 15 Petition for R f a Foreign Main Procee hapter 15 Petition for R f a Foreign Nonmain Pr	eding ecognition
Country of de	-	5 Debtors	racto			mpt Enti	itv	-			e of Debts k one box)	
Each country by, regarding,	in which a fo	oreign procee	eding	unde	(Check box or is a tax-ex r Title 26 of e (the Interna	, if applica empt orga- the United	ible) nization States	defined "incurr	are primarily condinated in 11 U.S.C. § red by an individual, family, or	3 101(8) as dual primarily	busing for	are primarily ess debts.
_		•	heck one box	()			ck one box:		-	ter 11 Debt		
attach sign	to be paid in ned application	installments on for the cou	(applicable to art's considerat a installments.	ion certifyi	ng that the	Chec	Debtor is no ck if: Debtor's agg	t a small busi	ness debtor as contingent liquida	defined in 11 U	C. § 101(51D). U.S.C. § 101(51D). cluding debts owed to insict on 4/01/16 and every thre	
Form 3A. Filing Fee attach sign			able to chapter art's considerat			ıst	A plan is be Acceptances	e boxes: ng filed with of the plan w	this petition.	V	n one or more classes of cre	
Statistical/A	dministrat	ive Inform	ation							THIS	S SPACE IS FOR COURT	USE ONLY
Debtor es	stimates tha	t, after any	be available exempt prop for distribut	erty is ex	cluded and	administr		es paid,				
Estimated Nu	umber of C 50- 99	reditors 100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated As	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,00 to \$100 million	11 \$100,000,00 to \$500 million	\$500,000,001 to \$1 billion				
Estimated Li \$0 to \$50,000	abilities \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001	\$1,000,001 to \$10	\$10,000,001 to \$50 million	\$50,000,000 to \$100 million	1 \$100,000,00 to \$500 million	\$500,000,001 to \$1 billion				

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Pg 2 of 55 **B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): **Voluntary Petition** Nichols, Shemika (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Case Number: Location Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Ross H. Briggs July 7, 2014 Signature of Attorney for Debtor(s) (Date) Ross H. Briggs 31633 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(04/13)

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Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Shemika Nichols

Signature of Debtor Shemika Nichols

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 7, 2014

Date

Signature of Attorney*

X /s/ Ross H. Briggs

Signature of Attorney for Debtor(s)

Ross H. Briggs 31633

Printed Name of Attorney for Debtor(s)

Ross H. Briggs, Attorney At Law

Firm Name

4144 Lindell Blvd, suite 202 Saint Louis, MO 63108

Address

Email: r-briggs@sbcglobal.net

314-652-8922 Fax: 314-652-8202

Telephone Number

July 7, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Nichols, Shemika

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols		Case No.		
		Debtor(s)	 Chapter	13	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
mental deficiency so as to be incapable of realifinancial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 1	109(h)(4) as impaired by reason of mental illness or izing and making rational decisions with respect to 09(h)(4) as physically impaired to the extent of being a credit counseling briefing in person, by telephone, or mbat zone.
requirement of 11 U.S.C. § 109(h) does not apply in the	
I certify under penalty of perjury that the ir	nformation provided above is true and correct.
	/s/ Shemika Nichols Shemika Nichols
Date: July 7, 2014	

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols		Case No.	
-		Debtor	,	
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	40,600.00		
B - Personal Property	Yes	3	5,065.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		37,843.43	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		198.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	9		59,107.25	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,140.56
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,966.00
Total Number of Sheets of ALL Schedu	ıles	23			
	T	otal Assets	45,665.00		
			Total Liabilities	97,148.68	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols		Case No.	
-		Debtor	.,	
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	198.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	11,717.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	11,915.00

State the following:

Average Income (from Schedule I, Line 12)	2,140.56
Average Expenses (from Schedule J, Line 22)	1,966.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,732.11

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		763.63
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	198.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		59,107.25
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		59,870.88

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B6A (Official Form 6A) (12/07)

In re	Shemika Nichols	Case No.	
-		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

			Claim of Entimption	
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 40,600.00 (Total of this page)

40,600.00 Total >

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B6B (Official Form 6B) (12/07)

In re	Shemika Nichols		Case No.	
•		Debtor	•,	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	-	15.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	St Louis Community Credit Union Checking & Savings	-	25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Furniture	-	1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothes	-	800.00
7.	Furs and jewelry.	jewelry	-	300.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		
			Sub-Tot	al > 2,640.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In	re Shemika Nichols		,	Case No.	
			Debtor		
		SCHED	ULE B - PERSONAL PROPER (Continuation Sheet)	TY	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars				
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
			(**	Sub-Tota Fotal of this page)	al > 0.00

Sheet __1__ of __2__ continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Shemika Nichols	Case No.	
-		Debtor ,	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	199	98 Chevy Silverado 2Dr 186,000 Miles	-	1,250.00
	other vehicles and accessories.	199	97 Plymounth Voyager 154,000 Miles-4Dr-	-	1,025.00
		198	86 Ford F-150 500,000 Miles 2Dr	-	150.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Sub-Total >

Total >

(Total of this page)

2,425.00

5,065.00

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B6C (Official Form 6C) (4/13)

In re	Shemika Nichols	Case No.	
_		Debtor	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds
\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property 8616 Mora Ln. St Louis, MO 63147	RSMo § 513.475	15,000.00	40,600.00
Cash on Hand Cash	RSMo § 513.430.1(3)	15.00	15.00
Checking, Savings, or Other Financial Accounts St Louis Community Credit Union Checking & Savings	RSMo § 513.430.1(3)	25.00	25.00
Household Goods and Furnishings Furniture	RSMo § 513.430.1(1)	1,500.00	1,500.00
Wearing Apparel Clothes	RSMo § 513.430.1(1)	800.00	800.00
<u>Furs and Jewelry</u> jewelry	RSMo § 513.430.1(2)	300.00	300.00
Automobiles, Trucks, Trailers, and Other Vehicle 1998 Chevy Silverado 2Dr 186,000 Miles	<u>es</u> RSMo § 513.430.1(5)	1,250.00	1,250.00
1997 Plymounth Voyager 154,000 Miles-4Dr-	RSMo § 513.430.1(5)	1,025.00	1,025.00
1986 Ford F-150 500,000 Miles 2Dr	RSMo § 513.430.1(5)	150.00	150.00

Total: 20,065.00 45,665.00

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R6D	Official	Form	6D)	(12/07)
BOD (Official	rorm	ועס	(12/07)

In re	Shemika Nichols		Case No.	
-		Debtor	,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	A H	DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	1-Q1-D	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxx0313 Fncl Assist/ National Asset Mortgage Pob 1996 Irmo, SC 29063		-	Opened 3/12/13 Last Active 9/09/13 Mortgage 8616 Mora Ln. St Louis, MO 63147 Value \$ 40,600.00		A T E D		35,242.00	0.00
Account No. 6805 Missouri Title Loan 12695 New Halls Ferry Rd. Saint Charles, MO 63303		-	2008 Non-Purchase Money Security 1986 Ford F-150 500,000 Miles 2Dr					
Account No. xxxx690-3 MSD P.O. BOX 437 Saint Louis, MO 63166		-	Value \$ 150.00 2014 Statutory Lien 8616 Mora Ln. St Louis, MO 63147 Value \$ 40,600.00	-			500.00 437.80	350.00
Account No. 6805 Title Max of Missouri 15 Bull St. Ste 200 Savannah, GA 31401		-	2013 Non-Purchase Money Security 1998 Chevy Silverado 2Dr 186,000 Miles Value \$ 1,250.00				1,663.63	413.63
continuation sheets attached		1			tota pag		37,843.43	763.63
			(Report on Summary of Sc	_	ota lule	- I	37,843.43	763.63

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B6E (Official Form 6E) (4/13)

In re	Shemika Nichols	Case No.	
_		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be

liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Totals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Shemika Nichols		Case No	
•		Debtor		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UZLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, S P U T E D AND MAILING ADDRESS Н AMOUNT DATE CLAIM WAS INCURRED W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2013 Account No. 6805 **Income Tax MO** Department of Revenue 0.00 **Taxation Division** P.O. Box 385 Jefferson City, MO 65105 198.00 198.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims (Total of this page) 198.00 198.00 Total 0.00 (Report on Summary of Schedules) 198.00 198.00

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B6F	Official	Form	6F)	(12/07)
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In re	Shemika Nichols	Case No.	
		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	E			=	AMOUNT OF CLAIM
Account No. 6805			2007	┇	A T E D			
AAA Checkmate 327 Missouri Ave Ste 412 East Saint Louis, IL 62201		-	Payday Loan		D			10,000.00
Account No. 6805			2014	П		T		
Ace Cash Express 7028 W. Florissant Saint Louis, MO 63136			Payday Loan					500.00
A				Ш			_	500.00
Account No. xxx8573 Advance America 10654 St Charles Rock Rd Saint Ann, MO 63074		-	2007 Loan					357.00
Account No. xxxxx-x5150			2014	Н			+	
Ameren P.O. Box 66529 Saint Louis, MO 63166-6529		-	Utility					761.47
8 continuation sheets attached			(Total of t	ubt				11,618.47

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B6F (Official Form 6F) (12/07) - Cont.

In re	Shemika Nichols	Case No
_		Debtor

	Гс	Но	sband, Wife, Joint, or Community	T _C	Ιυ	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	QULD	SPUTE	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxx0000			Opened 5/21/13 Last Active 8/01/13 Collection Medical	Т	A T E D		
Ars 1801 Nw 66th Ave Suite 200 Fort Lauderdal, FL 33313		-	Conection Medical				848.00
Account No. xxxxxxxxxxxxxx0000	╁		Opened 5/21/13 Last Active 8/01/13	+			040.00
Ars 1801 Nw 66th Ave Suite 200 Fort Lauderdal, FL 33313		-	Collection Medical				569.00
Account No. 6805	t		2014	+			
Certegy Check Service 11601 Roosevelet Blvd N. Saint Petersburg, FL 33716		-	Return Check Fee				400.00
Account No. xxxxxx0020	t		2006				
Chambers Medical Group Inc Joseph c. Eckert D.O. 3533 Dunn Rd. Florissant, MO 63033		-	Medical				25.00
Account No. 6805	\dagger	\vdash	2014	+	\vdash		
Chex Systems 7805 Hudson Rd. Ste 100 Saint Paul, MN 55125		-	Return Check Fee				300.00
Sheet no1 of _8 sheets attached to Schedule of	•	_		Sub			2,142.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	2,172.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Shemika Nichols	Case No
_		;
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

ODEDITODIS NAME	С	Hu	sband, Wife, Joint, or Community		; L	I D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C N T I N C C N C C N C C C		S P U T E D	
Account No. 2006			334508221	T	I A		
Clarkson Eyecare 217 Clarkson Rd Ballwin, MO 63011		-	Medical)	25.00
Account No. xxx0823	$^{+}$		Opened 3/17/06 Last Active 2/02/07 Notice Only				23.00
Cnac/Mo101 4132 Gravois Ave Saint Louis, MO 63116		_	Troube Only				
	┸						0.00
Account No. xxxxxx-xx5214 COLLECTOR OF REVENUE 1200 MARKET ST RM 12 Saint Louis, MO 63103		-	2014 Water & Trash				201.90
Account No. xx7217	╁		2009	+	+	+	
Connect Care 5535 Delmar Saint Louis, MO 63112		-	Medical				170.43
Account No. xxxxxxx1071			2009 Insurance				1.01.0
Credit Collections Services Geico Two Wells Ave Dept 9134 Newton Center, MA 02459		_					
•							49.67
Sheet no. 2 of 8 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total	Sul			447.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Shemika Nichols	Case No.	
_		Debtor	

	l c	Ни	sband, Wife, Joint, or Community		С	ш	П	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIS SUBJECT TO SETOFF, SO STATE	AIM	CONTINGEN	UZLLQULDA	D_	AMOUNT OF CLAIM
Account No. xxxx7584			Opened 12/18/09		Т	A T E		
Credit Management Lp 4200 International Pkwy Carrollton, TX 75007		-	Collection Charter Communications			D		488.00
Account No. xxxx8293			Opened 1/01/13 Last Active 3/01/14					400.00
Dcma 201 N. Main Street Suite 205 Saint Charles, MO 63301		-	Advance Loans 56					
								326.00
Account No. xxxx-xxx1087 Dennis Joseph Barton III c/o Countryside Townhomes 300 Evans Ave. Wood River, IL 62095		_	10/2009 Judgement					3,958.15
Account No. xxxxxxxxxxxxxxxxx0070 Dpt Ed/Slm Po Box 9635 Wilkes Barre, PA 18773		-	Opened 3/01/07 Last Active 7/01/12 Government Unsecured Guarantee Loan-Notice Only					0.00
Account No. xxxx9318 Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256		_	Opened 8/30/13 Last Active 10/01/13 Collection Charter Communications					202.00
Sheet no. <u>3</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	Stal of th		ota pag		4,974.15

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In re	Shemika Nichols	Case No
_		,
		Debtor

<u> </u>	_	ш	sband, Wife, Joint, or Community		_	111	Р	
(See instructions above.)	СОДШВНОК	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIS SUBJECT TO SETOFF, SO STATE	AIM	CONTINGEN	UZ LL QULD A		AMOUNT OF CLAIM
Account No. xxxxxx3162			2006		Т	A T E		
Forest Park Hospital/Accounts Receivable P.O. Box 638 Paris, TN 38242		_	Medical			D		152.33
Account No. x5515			2007					
Glennon Care Professional Services PO Box 504604 Saint Louis, MO 63150		_	Medical					353.00
Account No. xxxx-xxx6840	\vdash	-	9/2013				H	
JOHN HENRY SOEDER, III c/o AAA Checkmate LLC 1 CAMPBELL PLAZA 1A NORTH Saint Louis, MO 63139		_	Judgement					10,143.08
Account No. xxxxxx0000			2014					
Laclede Gas Drawer 2 Saint Louis, MO 63171		_	Gas					2,123.41
Account No. xxx3101			Opened 8/16/01 Last Active 1/02/09				H	
Midwest Acce 5900 Hampton Ave St Louis, MO 63109		_	Notice Only					0.00
Sheet no. <u>4</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(To	Sotal of th		ota pag		12,771.82

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B6F (Official Form 6F) (12/07) - Cont.

In re	Shemika Nichols	Case No
_		Debtor

		_		_			·
(See instructions above.)	CODEBTOR	Hu: H C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH _ ZGEZ	UNLIQUIDATED	S P U T E	AMOUNT OF CLAIM
Account No. xxx8160			Opened 5/25/08 Last Active 11/01/08	٦т	E		
Nco Fin/55 Po Box 13570 Philadelphia, PA 19101		_	Collection Depaul Health Center		D		431.00
Account No. xxxx0187			Opened 8/31/08 Last Active 10/01/08	+	H		
Nco Fin/55 Po Box 13570 Philadelphia, PA 19101		_	Collection St.Marys Health Center				75.00
Account No. xxx9206			Opened 8/03/08 Last Active 12/01/08		T		
Nco Fin/55 Po Box 13570 Philadelphia, PA 19101		_	Collection Depaul Health Center				60.00
Account No.			2013	\dagger	H		
P&B Real Estate 5933 Jackson Ave Saint Louis, MO 63134		_	rent				5,000.00
Account No. xxxx-xxx0048			2/2012	+	H		
Ryan K. Bratcher c/o SLM Education Credit Finance Co. PO Box 480707 Kansas City, MO 64148		_	Judgement				6,774.34
Sheet no. 5 of 8 sheets attached to Schedule of		_		Sub			12,340.34
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	12,340.34

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B6F	(Official	Form	6F)	(12/07)	- Cont

In re	Shemika Nichols	Case No.	
_		Debtor	

	1	ш	sband, Wife, Joint, or Community	<u> </u>	Li	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATE	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxx7671			Opened 2/23/07 Last Active 4/30/14 Educational	Т	T E D		
Sallie Mae Po Box 9655 Wilkes Barre, PA 18773		-	Educational				
							4,541.00
Account No. xxxxxx0424			2001 Cell Phone	T			
Sprint Nextel Correspondence Attn: Bankruptcy Dept P.O. Box 7949 Overland Park, KS 66207		-	Cen r none				
0.00.00.00.00.00.00.00.00.00.00.00.00.0							262.76
Account No. xxxxxx0050			2012 Medical				
SSM Health Care 3232 W. Royal Lane Irving, TX 75063		-					000.00
Account No. xxxx3685			2006	+			600.00
St. Louis Post Dispatch 900 N. Tucker Saint Louis, MO 63101		-	Newspaper Order				
Aggrupt No. w0954			2006	\downarrow			14.45
Account No. x9854 St. Louis Title Loan 9410 St. Charles Rock Rd. Saint Louis, MO 63114	_	_	2006 Loan				180.00
Sheet no. <u>6</u> of <u>8</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-		(Total of	Sub			5,598.21

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In re	Shemika Nichols	Case No
_		Debtor

	l c	н	sband, Wife, Joint, or Community			11	Р	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	IM	E N	UZLLQULDA	$D - \emptyset P \cup F \square D$	AMOUNT OF CLAIM
Account No. xxxxxxxxx00FC			Opened 5/17/13 Last Active 5/30/14		Т	D A T E D		
Stl Com Cu 3651 Forest Park St Louis, MO 63108-3380		-	Unsecured			U		500.00
Account No. 6805	┞		2014					300.00
Telecheck Bankruptcy Dept 5251 West Heimier Houston, TX 77056	-	-	Return Check Fee					500.00
Account No. xxxx4365	╁		2005					
Toys R Us 6926 S. Lindbergh Blvd Saint Louis, MO 63125		_	Credit Card					277.97
Account No. xxxx3676	t		Opened 3/19/07 Last Active 6/01/12					
U S Dept Of Ed/GsI/AtI Po Box 4222 Iowa City, IA 52244		-	Educational					4,569.00
Account No. xxxx9641	┞		Opened 3/19/07 Last Active 6/01/12					4,369.00
U S Dept Of Ed/GsI/AtI Po Box 4222 Iowa City, IA 52244	•	_	Educational					2,607.00
Sheet no7 of _8 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(To	So Stal of th		ota		8,453.97

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B6F (Official	Form 6F)	(12/07).	- Cont

In re	Shemika Nichols	Case No
-		Debtor ,

						_		
CREDITOR'S NAME,	CC	Hu	sband, Wife, Joint, or Community	CO	U	D		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT I NGENT	UNLIQUIDAT	SPUTED		AMOUNT OF CLAIM
Account No. 6805			2011		E			
US Bank 4301 Lindell Blvd Saint Louis, MO 63108		-	Overdraft Fee		D			250.00
Account No. xxxxx6482	H		2010	+	T	t	\dagger	
US Cellular PO Box 3517 Bloomington, IL 61702		-	Cell Phone					
								511.29
Account No.								
Account No.								
Account No.								
Sheet no. 8 of 8 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub this			\int	761.29
6			(1011)		Γota		+	
			(Report on Summary of So					59,107.25

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B6G (Official Form 6G) (12/07)

In re	Shemika Nichols	Case No.	
_		Debtor ,	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-45392 Doc 1 Filed 07/07/14 Entered 07/07/14 16:50:53 Main Document Pg 26 of 55

B6H (Official Form 6H) (12/07)

In re	Shemika Nichols	Case No.
_		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case 14-45392 Doc 1 Filed 07/07/14 Entered 07/07/14 16:50:53 Main Document Pg 27 of 55

	in this information to identify your optor 1 Shemika Ni								
	otor 2 use, if filing)								
	ted States Bankruptcy Court for the	e: <u>EASTERN DISTRICT</u>	OF MISSOURI						
(If kn	se number					☐ A supp	ended filing element showi	ng post-petition following date:	
	fficial Form B 6l chedule I: Your Inc					MM / E	DD/ YYYY		12/13
Be a suppos	is complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married pec are married and not fili ar spouse is not filing w	ng jointly, and yo ith you, do not inc	ur spouse clude infor	is li mati	ving with you ion about you	, include info r spouse. If r	rmation abou nore space is	sible for t your needed,
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	d			Employed Not employed		
	employers.	Occupation	Collector			Une	employed		
	Include part-time, seasonal, or self-employed work.	Employer's name	Coram Specia	alty Infusi	on				
	Occupation may include student or homemaker, if it applies.	Employer's address	1 CVS Drive Woonsocket,	RI 02895					
		How long employed t	here? <u>1yea</u> ı	r 6 mos					
Esti i spou	mate monthly income as of the case unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	late you file this form. If	, ,	·			person on the	e lines below. If	J
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,732.		ling spouse 0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.	.00 +\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	2,732.11	\$	0.00	

Official Form B 6I Schedule I: Your Income page 1

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Debto	or 1 Shemika Nichols	_	Case numb	er (if known)				
	Copy line 4 here	4.	For Deb	tor 1 2,732.11	For Debt	or 2 or g spouse 0.00		
5.	List all payroll deductions:				<u> </u>			
	5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$	347.53 10.00 0.00 0.00 234.02 0.00 0.00	\$ \$ \$ \$ \$ \$ + \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00		
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	591.55	\$	0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,140.56	\$	0.00		
	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify:	8c. 8d. 8e.	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00		
	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00		
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$	2,14	0.56 + \$_	0.0	= \$2	2,140.56	
	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
	Add the amount in the last column of line 10 to the amount in line 11. The rewards that amount on the Summary of Schedules and Statistical Summary of Certa applies					Combine		
13.	Do you expect an increase or decrease within the year after you file this form ■ No. □ Yes. Explain:	1?				monthly	income	

Official Form B 6I Schedule I: Your Income page 2

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D:11 :	in this information to i	identify ve	Nur 0000:					
NIII	in this information to i	identify yo	ur case:					
Deb	tor 1 She	mika Ni	chols			Check	if this is:	
						☐ An	amended filing	
	tor 2							g post-petition chapter 13
(Spc	ouse, if filing)					ex	penses as of the follo	owing date:
Unit	ted States Bankruptcy	Court for	the: EASTERN	DISTRICT OF MISS	OURI	N	MM / DD / YYYY	
Case	e number					□ А	separate filing for D	ebtor 2 because Debtor 2
(If k	nown)						aintains a separate h	
Ωf	ficial Form I	0.61						
	ficial Form I hedule J: Yo		vnenses					12/13
				ried people are filin	g together, both are eq	ually respons	sible for supplying	
info	rmation. If more spa	ce is need	ed, attach another		On the top of any addi			
(if k	nown). Answer every	question	•					
Part	1: Describe You	ır Househ	old					
1.	Is this a joint case?							
	■ No. Go to line 2.							
	☐ Yes. Does Debto	r 2 live in	a separate housel	nold?				
	□ No		-					
		otor 2 must	t file a separate Sch	edule J.				
2.	Do you have depend	dents?	□ No					
	Do not list Debtor 1 Debtor 2.		Yes. Fill out thi		Dependent's relate Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the depe	endents'						□ No
	names.				Daughter		6	Yes
								□ No
								Yes
								□ No
					-			Yes
								□ No
3.	Do your ovnonces in	aluda	_					☐ Yes
3.	Do your expenses in expenses of people of		■ No					
	yourself and your d							
Part	2: Estimate Voi	ır Ongoin	g Monthly Expens	ene				
					using this form as a su	applement in	a Chapter 13 case	to report
expe					tal <i>Schedule J</i> , check t			
	ude expenses paid for assistance and have		-	•			Your exp	enses
Suci	i assistance and nave	meradea	it on Schedule 1. 1	iour income (Officia	ar 1 01111 01.)			
4.	The rental or home and any rent for the g			ır residence. Include	e first mortgage paymen	4. \$		464.00
	If not included in li	ne 4:						
	4a. Real estate tax	xes				4a. \$		0.00
			or renter's insuran	ce		4b. \$		63.00
			air, and upkeep exp			4c. \$		50.00
	4d. Homeowner's	association	on or condominium	dues		4d. \$		0.00
5.	Additional mortgag	ge paymen	ts for your reside	nce, such as home eq	uity loans	5. \$		0.00

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1 Shemika Nichols	Case Hulli	ber (if known)	
tilities:			
	62	\$	275.00
•			0.00
<u> </u>			120.00
		· -	0.00
• • •			350.00
		· -	0.00
			135.00
			75.00
	11.	<u> </u>	50.00
	12.	\$	260.00
1 7			20.00
		· ·	0.00
_	14.	Ψ	0.00
· · · · · · · · · · · · · · · · · · ·	15a.	\$	0.00
			0.00
5c. Vehicle insurance	15c.	\$	90.00
			0.00
			0.00
	16.	\$	14.00
	17a.	\$	0.00
7b. Car payments for Vehicle 2	17b.	\$	0.00
7c. Other. Specify:	17c.	\$	0.00
· ·	17d.	\$	0.00
	d		
	18.	\$	0.00
ther payments you make to support others who do not live with you.		\$	0.00
pecify:	19.		
	our Incom	e.	
Oa. Mortgages on other property	20a.	\$	0.00
Ob. Real estate taxes	20b.	\$	0.00
Oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
Od. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
De. Homeowner's association or condominium dues	20e.	\$	0.00
ther: Specify:	21.	+\$	0.00
			4 000 00
	22.	\$	1,966.00
	22-	¢	2 4 40 50
1.			2,140.56
50. Copy your monthly expenses from line 22 above.	25D.	-\$	1,966.00
20 Cubting at vigure monthly armong a from your			
3c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	174.56
11 16 16 16 17 17 17 17 17 17 17 17 17 17 17 17 17	5b. Health insurance 5c. Vehicle insurance 5d. Other insurance. Specify: Caxes. Do not include taxes deducted from your pay or included in lines 4 or 20. specify: Personal Property Tax Installment or lease payments: 7a. Car payments for Vehicle 1 7b. Car payments for Vehicle 2 7c. Other. Specify: 7d. Other. Specify: 7dur payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: You. Mortgages on other property Ob. Real estate taxes Oc. Property, homeowner's, or renter's insurance	b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify:	b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services d. Other. Specify: God and housekeeping supplies 7. \$ Shildcare and children's education costs 8. \$ Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Contention. Include gas, maintenance, bus or train fare. Do not include are payments. Contertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ Sinsurance 15. Health insurance 15. Health insurance 15. Health insurance 15. Health insurance 15. Whice insurance. Specify: 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Legisty: 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Legisty: 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Carease. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 15. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Sees. Do n

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols	Case No.						
			Debtor(s)	Chapter	13			
	DECLARATION CONCERNING DEBTOR'S SCHEDULES							
	DECLARATION UNDER F	PENALTY (OF PERJURY BY INDIV	IDUAL DEI	BTOR			
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25							
	sheets, and that they are true and correct to the				·			
Date	July 7, 2014	Signature	/s/ Shemika Nichols					
•		U	Shemika Nichols					
			Debtor					

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols	Case No.		
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$16,392.00 2014 YTD: Debtor Employment Income \$31,192.00 2013: Debtor Employment Income \$18,398.00 2012: Debtor Employment Income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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B7 (Official Form 7) (04/13)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **OWING PAYMENTS**

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS OWING TRANSFERS**

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND AMOUNT STILL DATE OF PAYMENT AMOUNT PAID RELATIONSHIP TO DEBTOR OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY NATURE OF STATUS OR AND CASE NUMBER **PROCEEDING** AND LOCATION DISPOSITION **Shemika Nichols** Garnishment St. Louis County Court **Judgment** 1022-AC06840 7900 Carondelet Saint Louis, MO 63105 Shemika Nichols Garnishment St. Louis County Court **Judgment** 09SL-AC31087 7900 Carondelet Saint Louis, MO 63105 Shemika Jackson **Garnishment** 22nd Judicial Circuit Court **Judgment** 1222-AC00048 St Louis City 10 North Tucker Saint Louis, MO 63101

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

e a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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B7 (Official Form 7) (04/13)

4

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Ross H. Briggs 4144 Lindell Blvd, suite 202 St Louis, MO 63108 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 6/2014 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$156.00 filing fee
\$29.00 credit report

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 716 Baden St Louis, MO NAME USED **Shemika Nichols** DATES OF OCCUPANCY

2/2009--3/2013

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS **ENDING DATES**

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

, 1

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23 . Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	July 7, 2014	Signature	/s/ Shemika Nichols
	_	•	Shemika Nichols
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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United States Bankruptcy Court Eastern District of Missouri

In r	e Shemika Nichols		Case No.					
111.1	Ononina Monoro	Debtor(s)	Chapter	13				
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR D	EBTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of of the debtor(s).	of the petition in bankruptcy	, or agreed to be paid	d to me, for services rendered or to				
	For legal services, I have agreed to accept		\$	4,000.00				
	Prior to the filing of this statement I have received		\$	0.00				
	Balance Due		\$	4,000.00				
2.	\$156.00 of the filing fee has been paid.							
3.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are men	nbers and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names							
6.	In return for the above-disclosed fee, I have agreed to rend	er legal service for all aspec	ts of the bankruptcy	case, including:				
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 							
7.	By agreement with the debtor(s), the above-disclosed fee de	oes not include the followin	g service:					
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for	r payment to me for i	representation of the debtor(s) in				
Date	ed: _ July 7, 2014	/s/ Ross H. Brigg						
		Ross H. Briggs 3 Ross H. Briggs, 4144 Lindell Blvd Saint Louis, MO	11633 Attorney At Law d, suite 202 63108					
		314-652-8922 Fa r-briggs@sbcglo						

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Rankruntey Court

		stern District of Missouri	our t		
In re	Shemika Nichols		Case No.		
		Debtor(s)	Chapter	13	
	UNDER § 342(F NOTICE TO CONSULT b) OF THE BANKRUPT Certification of Debtor received and read the attached to	TCY CODE	,	tcy
Code.					
Shemi	ika Nichols	$_{ m X}$ /s/ Shemika I	Nichols	July 7, 2014	
Printed	l Name(s) of Debtor(s)	Signature of I	Debtor	Date	
Case N	No. (if known)	X			
		Signature of J	Toint Debtor (if any)	Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Eastern District of Missouri

In re	Shemika Nichols		Case No.			
·		Debtor(s)	Chapter	13		
	VERIFICATIO	ON OF CREDITOR	MATRIX			
contair comple	The above named debtor(s) hereby certificating the names and addresses of my creditorete.					
		/s/ Shemika Nichol	c			
		Shemika Nichols	3			
		Debtor				
		Dated: July 7,2	2014			

AAA Checkmate 327 Missouri Ave Ste 412 East Saint Louis, IL 62201

Ace Cash Express 7028 W. Florissant Saint Louis, MO 63136

Advance America 10654 St Charles Rock Rd Saint Ann, MO 63074

Ameren P.O. Box 66529 Saint Louis, MO 63166-6529

Ars 1801 Nw 66th Ave Suite 200 Fort Lauderdal, FL 33313

Ars 1801 Nw 66th Ave Suite 200 Fort Lauderdal, FL 33313

Certegy Check Service 11601 Roosevelet Blvd N. Saint Petersburg, FL 33716

Chambers Medical Group Inc Joseph c. Eckert D.O. 3533 Dunn Rd. Florissant, MO 63033

Chex Systems 7805 Hudson Rd. Ste 100 Saint Paul, MN 55125

Clarkson Eyecare 217 Clarkson Rd Ballwin, MO 63011

Cnac/Mo101 4132 Gravois Ave Saint Louis, MO 63116

COLLECTOR OF REVENUE 1200 MARKET ST RM 12 Saint Louis, MO 63103

Connect Care 5535 Delmar Saint Louis, MO 63112 Credit Collections Services Geico Two Wells Ave Dept 9134 Newton Center, MA 02459

Credit Management Lp 4200 International Pkwy Carrollton, TX 75007

Dcma 201 N. Main Street Suite 205 Saint Charles, MO 63301

Dennis Joseph Barton III c/o Countryside Townhomes 300 Evans Ave. Wood River, IL 62095

Dpt Ed/Slm Po Box 9635 Wilkes Barre, PA 18773

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Fncl Assist/ National Asset Mortgage Pob 1996 Irmo, SC 29063

Forest Park Hospital/Accounts Receivable P.O. Box 638 Paris, TN 38242

Glennon Care Professional Services PO Box 504604 Saint Louis, MO 63150

JOHN HENRY SOEDER, III c/o AAA Checkmate LLC 1 CAMPBELL PLAZA 1A NORTH Saint Louis, MO 63139

Laclede Gas Drawer 2 Saint Louis, MO 63171

Midwest Acce 5900 Hampton Ave St Louis, MO 63109

Missouri Title Loan 12695 New Halls Ferry Rd. Saint Charles, MO 63303 MO Department of Revenue Taxation Division P.O. Box 385 Jefferson City, MO 65105

MSD P.O. BOX 437 Saint Louis, MO 63166

Nco Fin/55 Po Box 13570 Philadelphia, PA 19101

Nco Fin/55 Po Box 13570 Philadelphia, PA 19101

Nco Fin/55 Po Box 13570 Philadelphia, PA 19101

P&B Real Estate 5933 Jackson Ave Saint Louis, MO 63134

Ryan K. Bratcher c/o SLM Education Credit Finance Co. PO Box 480707 Kansas City, MO 64148

Sallie Mae Po Box 9655 Wilkes Barre, PA 18773

Sprint Nextel Correspondence Attn: Bankruptcy Dept P.O. Box 7949 Overland Park, KS 66207

SSM Health Care 3232 W. Royal Lane Irving, TX 75063

St. Louis Post Dispatch 900 N. Tucker Saint Louis, MO 63101

St. Louis Title Loan 9410 St. Charles Rock Rd. Saint Louis, MO 63114

Stl Com Cu 3651 Forest Park St Louis, MO 63108-3380 Telecheck Bankruptcy Dept 5251 West Heimier Houston, TX 77056

Title Max of Missouri 15 Bull St. Ste 200 Savannah, GA 31401

Toys R Us 6926 S. Lindbergh Blvd Saint Louis, MO 63125

U S Dept Of Ed/Gsl/Atl Po Box 4222 Iowa City, IA 52244

U S Dept Of Ed/Gsl/Atl Po Box 4222 Iowa City, IA 52244

US Bank 4301 Lindell Blvd Saint Louis, MO 63108

US Cellular PO Box 3517 Bloomington, IL 61702

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Shemika Nichols	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Number:		☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF INC	CON	1E				
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.									
	b. ■	Married. Complete both Column A ("Debto	r's l	ncome") and Col	umn	B ("Spouse's Incor	ne'')	for Lines 2-10.		
		gures must reflect average monthly income re						Column A		Column B
		dar months prior to filing the bankruptcy case						Debtor's		Spouse's
		ling. If the amount of monthly income varied onth total by six, and enter the result on the a			, you	must divide the		Income		Income
2	Gros	s wages, salary, tips, bonuses, overtime, con	nmis	sions.			\$	2,732.11	\$	0.00
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
				Debtor		Spouse				
	a.	Gross receipts	\$	0.00		0.00				
	b. c.	Ordinary and necessary business expenses Business income	\$	otract Line b from		0.00	\$	0.00	d.	0.00
4	the ap	s and other real property income. Subtract oppropriate column(s) of Line 4. Do not enter of the operating expenses entered on Line by	a nu	mber less than zero deduction in Par	o. D	o not include any				
4	 	Ia · ·	\$	Debtor	Ф	Spouse				
	a. b.	Gross receipts Ordinary and necessary operating expenses	\$	0.00 0.00		0.00				
	c.	Rent and other real property income		btract Line b from			\$	0.00	\$	0.00
5	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
6	Pensi	on and retirement income.					\$	0.00	\$	0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.				paid for that nts paid by the	\$	0.00	\$	0.00	
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:									
		mployment compensation claimed to benefit under the Social Security Act Debto.	¢	0.00 Sp		s 0.00	\$	0.00		0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	Debto	1]				
	a.	\$ \$	_ _{\$} 0.0	0 \$	0.00		
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B in Column B. Enter the total(s).	1 *			0.00		
11	Total. If Column B has been completed, add Line 10, Column the total. If Column B has not been completed, enter the amount of the column B has not been completed, enter the amount of the column B has not been completed.			"	2,732.11		
	Part II. CALCULATION OF § 13		PERIOD				
12	Enter the amount from Line 11			\$	2,732.11		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ b. \$ c. \$ \$ C. \$						
	Total and enter on Line 13			\$	0.00		
14	Subtract Line 13 from Line 12 and enter the result.						
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.						
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	a. Enter debtor's state of residence: MO b	b. Enter debtor's household size:	3	\$	58,310.00		
17	Application of § 1325(b)(4). Check the applicable box and pr ■ The amount on Line 15 is less than the amount on Line top of page 1 of this statement and continue with this state □ The amount on Line 15 is not less than the amount on L at the top of page 1 of this statement and continue with this	16. Check the box for "The applicatement. Line 16. Check the box for "The applicatement.	olicable commitmen		-		
	Part III. APPLICATION OF § 1325(b)(3) F	OR DETERMINING DISPOSAL	BLE INCOME				
18	Enter the amount from Line 11.			\$	2,732.11		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ b. \$ \$						
	Total and enter on Line 19.	\$		\$	0.00		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.				2.732.11		

21		dized current monthly inc ne result.	come for § 1325(b)(3). N	Aultip	ly the a	mount from Line 2	0 by the number 12 and	\$	32,785.32
22	Applicable median family income. Enter the amount from Line 16.					\$	58,310.00		
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determ 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part					this statement. "Disposable income is no	t determi	ined under §	
		Part IV. C	ALCULATION ()F I	EDU	CTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ds of th	e Internal Reve	nue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					Expenses for the om the clerk of the e allowed as exemptions	\$		
24B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.					onal Standards for able at cable number of persons o are 65 years of age or ory that would currently ional dependents whom and enter the result in the case of the			
	Perso	ns under 65 years of age		Persons 65 years of age or older					
	a1.	Allowance per person		a2.	Allow	ance per person			
	b1.	Number of persons		b2.		er of persons			
	c1.	Subtotal		c2.	Subtot	al		\$	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					nis information is e family size consists of	\$		
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rent expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 c. Net mortgage/rental expense Subtract Line b from Line a.				\$				
26	25B do Standa	Standards: housing and uses not accurately compute rds, enter any additional antion in the space below:	the allowance to which	you a	re entitl	ed under the IRS H	Iousing and Utilities	\$	

	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.				
27A	Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7. \square 0				
	If you checked 0, enter on Line 27A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	"Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$		
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) \square 1 \square 2 or more.				
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Li the result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of the Average			
	a. IRS Transportation Standards, Ownership Costs	\$			
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$		
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Li the result in Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	e IRS Local Standards: Transportation court); enter in Line b the total of the Average			
	b. 2, as stated in Line 47	\$	¢.		
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sales	come taxes, self employment taxes, social	\$		
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions for employment are required for your employment, such as mandatory uniform costs.	retirement contributions, union dues, and	\$		
32	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.		\$		
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$		
34	Other Necessary Expenses: education for employment or for a phythe total average monthly amount that you actually expend for educat education that is required for a physically or mentally challenged deproviding similar services is available.	ion that is a condition of employment and for	\$		
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$		
36	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	nthly amount that you actually expend on our dependents, that is not reimbursed by the amount entered in Line 24B. Do not	\$		

37	Other actuall pagers, welfare	\$			
38	Total l	Expenses Allowed under IRS Standards. Enter	the total of Lines 24 through 37.	\$	
		<u>-</u>	onal Living Expense Deductions penses that you have listed in Lines 24-37		
		egories set out in lines a-c below that are reasona	Savings Account Expenses. List the monthly expenses in bly necessary for yourself, your spouse, or your		
39	a.	Health Insurance	\$		
	b.	Disability Insurance	\$		
	c.	Health Savings Account	\$		
	Total a	and enter on Line 39		\$	
	If you below:		your actual total average monthly expenditures in the space		
40	expens ill, or c	es that you will continue to pay for the reasonabl	family members. Enter the total average actual monthly e and necessary care and support of an elderly, chronically f your immediate family who is unable to pay for such	\$	
41	actuall		rage reasonably necessary monthly expenses that you er the Family Violence Prevention and Services Act or other required to be kept confidential by the court.	\$	
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National			\$	
45	contrib		necessary for you to expend each month on charitable ts to a charitable organization as defined in 26 U.S.C. § 15% of your gross monthly income.	\$	
46	Total A	Additional Expense Deductions under § 707(b)	Enter the total of Lines 39 through 45.	\$	

	Subpart C: Deductions for Debt Payment						
47	Future payments on secured claims own, list the name of creditor, identification check whether the payment includes a scheduled as contractually due to each case, divided by 60. If necessary, list Payments on Line 47.	Payment, and tal of all amounts the bankruptcy					
	Name of Creditor						
	a.		\$ Total: Add Lines	□yes □no	\$		
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in						
	a.		\$	Total: Add Lines	\$		
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.						
50	issued by the Executive Office information is available at we the bankruptcy court.)	hapter 13 plan payment. istrict as determined under schedules the for United States Trustees. (This the www.usdoj.gov/ust/ or from the clerk of the expense of chapter 13 case	x Total: Multiply Li	nes a and b	\$		
51	Total Deductions for Debt Payment	. Enter the total of Lines 47 through 5	0.		\$		
	S	Subpart D: Total Deductions f	rom Income		•		
52		Enter the total of Lines 38, 46, and 5			\$		
	Part V. DETERMI	NATION OF DISPOSABLE I	NCOME UNDI	ER § 1325(b)(2)		
53	Total current monthly income. Ent	er the amount from Line 20.			\$		
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability						
55		nter the monthly total of (a) all amount etirement plans, as specified in § 541(billion in § 362(b)(19).			\$		
56	Total of all deductions allowed und	er § 707(b)(2). Enter the amount from	Line 52.		\$		

	Deduction for special circumstances. If there are special circumstances is no reasonable alternative, describe the special circum. If necessary, list additional entries on a separate page. Total provide your case trustee with documentation of these export the special circumstances that make such expense necessary.	nstances and the resulting expenses in lines a-c below. the expenses and enter the total in Line 57. You must penses and you must provide a detailed explanation				
57	Nature of special circumstances	Amount of Expense				
	a.	\$				
	b.	\$				
	c.	\$				
		Total: Add Lines \$				
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.					
59	Monthly Disposable Income Under § 1325(b)(2). Subtract	t Line 58 from Line 53 and enter the result.				
	Part VI. ADDITION	NAL EXPENSE CLAIMS				
	of you and your family and that you contend should be an ad	not otherwise stated in this form, that are required for the health and welfare dditional deduction from your current monthly income under § a separate page. All figures should reflect your average monthly expense for				
60	Expense Description	Monthly Amount				
	a.	\$				
	b.	\$				
	c. d.	\$ \$				
		ines a, b, c and d \$				
		VERIFICATION				
	must sign.)	ded in this statement is true and correct. (If this is a joint case, both debtors				
61	Date: July 7, 2014	Signature: /s/ Shemika Nichols				
		Shemika Nichols				
		(Debtor)				